

**RULES 63 AND 67 (37 C.F.R. 1.63 and 1.67)  
DECLARATION AND POWER OF ATTORNEY**

**FOR UTILITY/DESIGN/CIP/PCT NATIONAL APPLICATIONS**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which: (mark only one)

- ☒ (a) is attached hereto.
- ☒ (b) was filed on September 11, 1998 as Application Serial No. 09/297,649, Attorney Docket No. 20309/95606 and was amended on \_\_\_\_\_ (if applicable).
- \_\_\_ (c) was filed as PCT International Application No. PCT/\_\_\_\_\_ on \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).
- \_\_\_ (d) was filed on \_\_\_\_\_, 1999 as Application Serial No. 09/\_\_\_\_\_ and was issued a Notice of Allowance on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims as amended by any amendment referred to above or as allowed as indicated above.

I acknowledge the duty to disclose all information known to me to be material to the patentability of this application as defined in 37 C.F.R. §1.56. If this is a continuation-in-part (CIP) application, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the Office all information known to me to be material to patentability of the application as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this CIP application.

I hereby claim foreign priority benefits under 35 U.S.C. §119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate filed by me or my assignee disclosing the subject matter claimed in this application and having a filing date (1) before that of the application on which my priority is claimed or, (2) if no priority is claimed, before the filing date of this application:

PRIOR FOREIGN PATENTS

Number	Country	Month/Day/Year Filed	Date first laid-	Date patented or Granted	Priority Claimed	
			open or Published		Yes	No
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

I hereby claim the benefit under 35 U.S.C. §120/365 of any United States application(s) listed below and PCT international applications listed above or below:

PRIOR U.S. OR PCT APPLICATIONS

Application No. (series code/serial no.)	Month/Day/Year Filed	Status (pending, abandoned, patented)
_____	_____	_____

I hereby appoint: Peter J. Manso, Registration No. 32,264

as my attorneys and/or agents; with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, and to file and prosecute any international patent application filed thereon before any international authorities under the Patent Cooperation Treaty, and I hereby authorize them to act and rely on instructions from and communicate directly with the person/assignee/attorney/firm/organization who/which first sent this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instruct them in writing to the contrary.

Please address all correspondence and direct all telephone calls to:

Akerman Senterfitt & Eidson, P.A.  
Las Olas Centre II  
350 East Las Olas Boulevard  
Suite 1600  
Fort Lauderdale, Florida 33301  
Telephone No.: (954) 463-2700  
Facsimile No.: (954) 463-2224

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAMED INVENTOR(S)**

Jack L. Aronowitz		
<b>Full Name</b>	<b>Inventor's Signature</b>	<b>Date</b>
Del Ray Beach, Florida, USA		USA
<b>Residence (city, state, country)</b>		<b>Citizenship</b>
6591 Skyline Drive Del Ray Beach, Florida 33446 <b>Post Office Address (including zip code)</b>		

Joel R. Mitchen		
<b>Full Name</b>	<i>Joel R. Mitchen</i>	<u>110700</u>
	<b>Inventor's Signature</b>	<b>Date</b>
Indianapolis, Indiana		USA
<b>Residence (city, state, country)</b>		<b>Citizenship</b>
1718 Apt. B Handball Lane Indianapolis, Indiana 46260		
<b>Post Office Address (including zip code)</b>		

(FOR ADDITIONAL INVENTORS, check here \_\_\_\_\_ and add additional sheet for inventor information regarding signature, name, date, citizenship, residence and address)

**RULES 63 AND 67 (37 C.F.R. 1.63 and 1.67)  
DECLARATION AND POWER OF ATTORNEY**

**FOR UTILITY/DESIGN/CIP/PCT NATIONAL APPLICATIONS**

As a below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name; and

I believe that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

the specification of which: (mark only one)

- ☐ (a) is attached hereto.
- ☐ (b) was filed on \_\_\_\_\_ as Attorney Docket No. \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).
- ☐ (c) was filed as PCT International Application No. PCT/ \_\_\_\_\_ on \_\_\_\_\_ and was amended on \_\_\_\_\_ (if applicable).
- ☒ (d) was filed on September 11, 1998 as Application Serial No. 09/297,649 and was issued a Notice of Allowance on \_\_\_\_\_.

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims as amended by any amendment referred to above or as allowed as indicated above.

I acknowledge the duty to disclose all information known to me to be material to the patentability of this application as defined in 37 C.F.R. §1.56. If this is a continuation-in-part (CIP) application, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of 35 U.S.C. §112, I acknowledge the duty to disclose to the Office all information known to me to be material to patentability of the application as defined in 37 C.F.R. §1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this CIP application.

I hereby claim foreign priority benefits under 35 U.S.C. §119/365 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate filed by me or my assignee disclosing the subject matter claimed in this application and having a filing date (1) before that of the application on which my priority is claimed or, (2) if no priority is claimed, before the filing date of this application:

PRIOR FOREIGN PATENTS

Number	Country	Month/Day/Year Filed	Date first laid-	Date patented or Granted	Priority Claimed	
			open or Published		Yes	No
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

I hereby claim the benefit under 35 U.S.C. §120/365 of any United States application(s) listed below and PCT international applications listed above or below:

PRIOR U.S. OR PCT APPLICATIONS

Application No. (series code/serial no.)	Month/Day/Year Filed	Status (pending, abandoned, patented)
_____	_____	_____

I hereby appoint:

Peter J. Manso, Registration No. 32,264

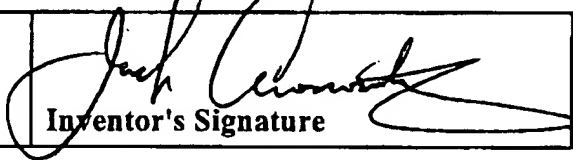
as my attorneys and/or agents, with full power of substitution and revocation, to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, and to file and prosecute any international patent application filed thereon before any international authorities under the Patent Cooperation Treaty, and I hereby authorize them to act and rely on instructions from and communicate directly with the person/assignee/attorney/firm/organization who/which first sent this case to them and by whom/which I hereby declare that I have consented after full disclosure to be represented unless/until I instruct them in writing to the contrary.

Please address all correspondence and direct all telephone calls to:

Akerman Senterfitt & Eidson, P.A.  
350 Las Olas Boulevard  
Suite 1600  
Fort Lauderdale, Florida 33301  
Telephone: 954-463-2700  
Facsimile: 954-463-2224

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

**NAMED INVENTOR(S)**

Jack L. Aronowitz JL		12/6/99
<b>Full Name</b>	<b>Inventor's Signature</b>	<b>Date</b>
Del Ray Beach, Florida	USA	
<b>Residence (city, state, country)</b>	<b>Citizenship</b>	
6591 Skyline Drive Del Ray Beach, Florida 33446 Post Office Address (including zip code)		

Joel R. Mitchen		
<b>Full Name</b>	<b>Inventor's Signature</b>	<b>Date</b>
1813 East Grand Avenue Lindenhurst, Illinois USA		USA
<b>Residence (city, state, country)</b>		<b>Citizenship</b>
Post Office Address (including zip code)		

<b>Full Name</b>	<b>Inventor's Signature</b>	<b>Date</b>
<b>Residence (city, state, country)</b>		<b>Citizenship</b>
Post Office Address (including zip code)		

<b>Full Name</b>	<b>Inventor's Signature</b>	<b>Date</b>
<b>Residence (city, state, country)</b>		<b>Citizenship</b>
Post Office Address (including zip code)		

(FOR ADDITIONAL INVENTORS, check here \_\_\_\_\_ and add additional sheet for inventor information regarding signature, name, date, citizenship, residence and address)